PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD									Application or Observember			
Substitute for Form PTO-875												
		CLAIMS AS	FILED -	PART I (Co	SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY				
FOR NUMBER FILED NUMBER EXTRA						RATE	_ FEE		RATE			
BASIC FEE (37 CFR 1.16(a))							3/2		- KATE	FEE		
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = .						1.4		OR		\$		
INDEPENDENT CLAIMS						× 3 7 (1)	7	OR ·	× \$=	·		
		NT CLAIM PRESE	minus 3		×(s,) =		OR	× \$=				
\vdash				CFR 1.16(d))	+k 1=	11/12	OR	+ \$=				
• If t	he difference in (column 1 is less th	an zero, ente	er "0" in column	TOTAL (OR	TOTAL				
CLAIMS AS AMENDED - PART II												
$/\!/\cdot$	1 1·Q	(Column 1)		(Column 2)	(Column 3)	SMALL E	ENTITY	OR		RTHAN		
Α		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT				SMALL	ENITTY		
AMENDMENT		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ΜQ	Total (37 CFR 1.16(c))	. 🗸	Minus		=,``]	25		OR	X \$ =	166		
EN	Independent (37 CFR 1.16(b))	2	Minus	2	=	110						
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPENDEN	T CLAIM (37 CF	R 1 16(d))			OR	× \$=			
				(0.01		TOTAL		OR	+ \$ =			
						ADD'L FEE		- OR	ADD'L FEE			
<u> </u>		(Column 1)		(Column 2) HIGHEST	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
DM	Total (37 CFR 1.16(c))	•	Minus	**	=	x s =		OR	X \$=	FEE		
ΞN	Independent (37 CFR 1.16(b))	•	Minus	***	=	X \$ =			x \$ =			
AR	FIRST PRESENT	ATION OF MULTIPL	E DEPENDEN	IT CLAIM (37 CF			OR -					
						TOTAL =		OR	+ \$ = TOTAL			
						ADD'L FEE		OR	ADD'L FEE			
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)			,				
ENTC		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	!	RATE	ADDI- TIONAL		
)ME	Total (37 CFR 1.16(c))	•	Minus	••	=	x s =	- 122			<u>FEE</u>		
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	•••	=	x \$ =		OR	X \$ =			
AM	FIRST PRESENT	TATION OF MULTIPL	E DEPENDEN	IT CLAIM (37 CF			OR	X \$=				
					TOTAL =		OR	+ \$ =				
1	 If the entry in c 	olumn 1 is less tha	an the entry i	in column 2 writ	e *0* in column 1	ADD'L FEE		OR	ADD'L FEE			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

"" If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection sestimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Effective December 29, 1999														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	1	RATE	FEE	
BASIC FEE										345.00	OR	, , , , ,	690.00	
TOTAL CLAIMS			/5 minus 20= •					X\$ 9= /			OR	X\$18=		
	EPENDENT CL		minus 3 = :			·					OR	X78=		
	MULTIPLE DEPENDENT CLÁIM PRESENT										OR	+260=		
* If	f the difference in column 1 is less than zero, enter "0" in column 2									345	OR	TOTAL	·	
Column 1) (Column 2) (Column 3)									SMALL	ENTITY	OR	OTHER SMALL E		
AMENDMENT A		CLA REMA AFT AMENI	INING ER		l	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	· /	5_	Minus	**	20			X\$ 9=		OR	X\$18=		
AME	Independent FIRST PRESE	• /	U OF MI	Minus	PEN.	DENT CLAIM	=	·	X39=		OR	X78=		
_	. FINOT I HEGE	1 OF IVIC	,		+130=		OR	+260=						
,	1/1/07										OR	TOTAL ADDIT. FEE		
\searrow	1.07UD		mn 1)		((Column 3)	٠.	ADDIT. FEE		•		• •	
ENT B		REMA	IIMS IINING TER DMENT		Р	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	: /	<u> </u>	Minus	••	$\propto 0$	=	_	X\$ 9=		ŎR	X\$18=		
AME	Independent FIRST PRESE	• ^	P OF MI	Minus	**	CENT CLAIM	=		*20-	452	OR	X78=		
	rino i rhese	NIATIO	V OF INC	JUIPLE DEF	'CIV	DENT CLAIN			+130=	_	OR	+260=		
6	1.1/1/12								TOTAL ADDIT. FEE	40	OR	TOTAL ADDIT. FEE		
1	MUUU	(Colu			(((Column 3)							
AMENDMENT C		CLA REMA AFI AMENI	INING TER		Р	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	\cdot / \cdot	7,	Minus	. ••	Wy !	= _		X\$ 9=		OR	X\$18=		
AME	Independent		<u> </u>	Minus	••		<u>, </u>		X39= -		OR	X78=		
	-FIRST PRESE	NTATIO	N.OF.MU	JUTIPLE DEP	;EN	DEŅT CLAIM			• • •					
•	If the entry in colur	mn 1 is le:	ss than th	na entry in colu	mn 2	> write "0" in col	umn 3.	l	+130=		OR	+260=		
••	If the "Highest Nur "If the "Highest Nur	mber Prev	iousty Pa	aid For IN THIS	S SP	PACE is less than	n 20, enter "20."	- ,	TOTAL ADDIT. FEE		OR	ADDIT. FEE	L	
	The "Highest Num	ber Previ	ously Pai	id For (Total or	r Inde	ependent) is the	highest numbe	r fou	ind in the ap	propriate box	x in co	lumn 1.		

Application or Docket Number